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ALPEMA	TRANSMITTAL FORM		First Named Inventor	Gopal Parupudi	
	I OKW		Group Art Unit	2172	
	(to be used for all correspondence after init	al filing)	Examiner Name	ANH LY	
	Total Number of Pages in This Submission		Attorney Docket Number	MS1-505US	
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Fee Transmittal Form  Fee Attached  Licens  Petition  After Final  Affidavits/declaration(s)  Extension of Time Request  Express Abandonment Request  Information Disclosure Statement  Certified Copy of Priority  Drawin  Drawin  Drawin  Petition  Provisi  Provisi  Chang  Address  Termin  Reque		sing-related Papers on to Convert to a cional Application or of Attorney, Revocation ge of Correspondence	After Allowance Communication to Group  Appeal Communication to Board of Appeals and Interferences  Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  Proprietary Information  Status Letter  Other Enclosure(s) (please identify below): Fee transmittal; information disclosure statement; PTO for 1449; (15) references; return postcard		
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hereby	certify that this correspondence is bei ficient postage as EXPRESS mail in an	ng facsimile trans n envelope addre	smitted to the USPTO or dep ssed to: Commissioner for P	osited with the United States Postal Service atents, P.O. Box 1450, Alexandria, VA 22313	

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Scient to the Consolidated Appropriations Act, 2005 (H.R. 4818). Effective on 12/08/2004. Application Number 09/544,253 TRANSMI 4/5/2000 Filing Date For FY 2005 Gopal Parupudi First Named Inventor ANH LY **Examiner Name** Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2172 TOTAL AMOUNT OF PAYMENT (\$) 180.00 MS1.0505US Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Name: Lee & Hayes, PLLC Deposit Account Deposit Account Number: 12-0769 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) ✓ Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES** Small Entity **Small Entity Small Entity** Fees Paid (\$) Fee (\$) Fee (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) 200 Utility 300 150 500 250 100 130 100 200 100 65 Design 50 200 160 Plant 100 300 150 80 Reissue 300 150 500 250 600 300 0 Provisional 200 100 0 0 0 Small Entity 2. EXCESS CLAIM FEES Fee (\$) Fee (\$) Fee Description Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100 180 Multiple dependent claims Multiple Dependent Claims **Total Claims** Fee Paid (\$) Fee (\$) 50 Fee (\$) Fee Paid (\$) - 20 or HP = HP = highest number of total claims paid for, if greater than 20 Fee Paid (\$) Extra Claims Fee (\$) Indep. Claims 200 - 3 or HP = HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Fee Paid (\$) **Total Sheets Extra Sheets** Number of each additional 50 or fraction thereof \_\_\_ (round up to a whole number) x - 100 = / 50 = Fees Paid (\$) 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) 180.00 Other: Information Disclosure Statement

SUBMITTED BY		21	<b>a</b> .	 •
Signature	3/1	111	Registrat (Attorney/	Telephone (509) 324-9256
Name (Print/Type	Lance R. Sad	ler		 Date 12/10/9

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